

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
09/051670

FILING DATE

APPLICANT(S)

7749 9-20-99 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3	/		X		X	
4	/					
5			/		/	
6			/		/	
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.			1	2	3	
TOTAL DEP.			1	2	1	
TOTAL CLAIMS	1		6	4	4	

*	*	*	*
51			
52			
53			
54			
55			
56			
57			
58			
59			
60			
61			
62			
63			
64			
65			
66			
67			
68			
69			
70			
71			
72			
73			
74			
75			
76			
77			
78			
79			
80			
81			
82			
83			
84			
85			
86			
87			
88			
89			
90			
91			
92			
93			
94			
95			
96			
97			
98			
99			
100			
TOTAL IND.			
TOTAL DEP.			
TOTAL CLAIMS			

PTO-1280 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE

PATENT AND TRADEMARK OFFICE

BEST AVAILABLE COPY

2

CLAIMS ONLY

Application Number

090576.70

Filing Date

Applicant(s)

3-6-00 4-3-00 7-21-00

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1	/		/		/				51			
2		/							52			
3									53			
4									54			
5	/								55			
6			/		/				56			
7				/					57			
8					/				58			
9						/			59			
10									60			
11									61			
12									62			
13									63			
14									64			
15									65			
16									66			
17									67			
18									68			
19									69			
20									70			
21									71			
22									72			
23									73			
24									74			
25									75			
26									76			
27									77			
28									78			
29									79			
30									80			
31									81			
32									82			
33									83			
34									84			
35									85			
36									86			
37									87			
38									88			
39									89			
40									90			
41									91			
42									92			
43									93			
44									94			
45									95			
46									96			
47									97			
48									98			
49									99			
50									100			
Total Indep	2			2			3					
Total Depend	8	←		8	←		7	←				
Total Claims	10			10			10					